

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 3

Application Number 10/074,614

Filing Date February 13, 2002

First Named Inventor Hubert

Art Unit 1751

Examiner Name Webb, Gregory E.

RECEIVED

CENTRAL FAX CENTER

JAN 08 2008

Attorney Docket Number 8036(1)

ENCLOSURES (Check all that apply)

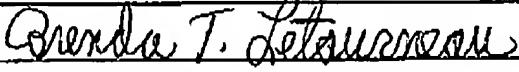
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input checked="" type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Tyco Safety Products		
Signature			
Printed name	Gerald M. Bluhm		
Date	1/8/08	Reg. No.	44,035

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Brenda T. Letourneau	Date	1/8/2008

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

JAN. 8. 2008 1:09PM SIMPLEXGRINNELL/LEGAL

Application No.: 10/074,814

RECEIVED NO. 759 P. 2
CENTRAL FAX CENTER

JAN 8 2008

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re: Hubert et al.

Confirmation No: 8084

Serial No: 10/074,814.

Group: 1751

Filed: February 13, 2002

Examiner: Webb,
Gregory E.

For: AQUEOUS FOAMABLE CONCENTRATES AND METHODS

FEE CALCULATION SHEET FOR PAYMENT OF TERMINAL DISCLAIMER

VIA FACSIMILE: (571)273-8300
Mail Stop: AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

Applicants respectfully submit the attached Terminal Disclaimer for the above-referenced application.

The Terminal Disclaimer fee in the amount of \$130.00, as set forth in 37 CFR 1.20(d), was paid on May 25, 2007. Therefore, it is believed that no additional fees are needed.

Additionally, the Commissioner is hereby authorized to charge any additional fees or credit any overpayment to Deposit Account Number 19-1346.

Respectfully submitted,

50 Technology Drive
Westminster, MA 01441
Date: 1/8/08

By Gerald M. Bluhm
Gerald M. Bluhm
Registration No.: 44,035
Tel.: 978-731-7244
Fax: 978-731-7841

01/09/2008 PCHONP 00000013 191346 10074814

01 FC:1814 130.00 DA
8036(1) US